PART B - FEE(S) TRANSMITTAL 04-28-06							
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24628 75				have its own certificate Ex	of mailing or transmission press Mail #EV5	92965501	
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05/01/2006 RMEBRAHI 0			Part S	truler	(Signature)		
01 FC:2501 700.00 DA 02 FC:1504 300.00 DA					4-27-06		(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE			TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/612,031 07/02/2003			Mitsuzo Shida			88174	5856
TITLE OF INVENTION: POLYOLEFIN-BASED ADHESIVE RESINS AND METHOD OF MAKING ADHESIVE RESINS 05/01/2006 RMEBRAH1 00000077 10612031							
01 FC:1504	300.00 OP						
02 FC 2501 03 FC 8001	SMALL EN 130,00 OF	ISSUE FEE		PL	IBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional YES		\$700		\$300		\$1000	07/14/2006
EXAMINER		ART UNIT		CI	ASS-SUBCLASS		
MULLIS, JEFFREY C		1711		525-070000			
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☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
MSI Technology LIC Arlington Heights, Illinois							
Please check the appropriate	assignee category or category	ries (will not be pr	inted on the p	oatent):	Individual X Co	orporation or other private g	roup entity Government
4a. The following fee(s) are		Payment of Fee(s):					
☑ Issue Fee☑ Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-0920 (enclose an extra copy of this form).					
5. Change in Entity Status (from status indicated above) X Applicant claims SMALL ENTITY status See 37 CFR 27 (g)(2)							

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Date 4/27/06

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